## **APPLICATION FOR BUILDING PERMIT**

## **Commercial Remodeling**

Enter/Approve	DATE	
PAID	DATE	

City of Lake Jackson 25 Oak Drive Lake Jackson, TX 77566 (979) 415-2430 Fax (979) 297-9804 OFFICE USE ONLY

APPLICATION #

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Address:			BLDG I.D. = SUBD	BLK	LOT	
Description of Work:			,	Total Estimated Val		
Contractor:				Phone:		
Owner/Other:						
Type of Building:			:	Sq. Ft. of Addition <sub>-</sub>		
Occupancy Type:						
		Chan d Dina				
Elevator Flag: Total Percentage of	Landecaning:	Stand Pipe	e Flag	# of Parki	ing Places	
Total Fercentage of	Landscaping.					
Permit Issued To		Address:			Amount:	
Signature:				Phone:		
		Application for	or Electrical Permit			
Contractor:		Address:		Phone:		
Master:			License #:			
Work Description:						
Each outlet/switch/lightin				Each 3 Pole Circuit	T. D. 1	
Each Trash Compactor/Compa	to 10 HP 1		Meter Loop 50 ton & Greater		T- Pole Each Panel	
Motors. 0	10 10 1111	0 10 30 111	Date Paid:		Amount:	
		Application for	or Plumbing Permit			
				Phone:		
Master:			Master License #:			
Work Description:						
Each Drain	_		Each Cold Water Outlet		Water Outlet	
Each Gas Outlet					Amount:	
		Application fo	r Mechanical Permit			
Contractor:		Address:		Phone:		
Master:			Master License #:			
Work Description:						
Motors:	0 to 5 ton5	to 10 ton	10 to 50 ton	-		
			Date Paid:		Amount:	
Application for Tap and Sewer Fee						
Size Location			Sewer _ Date			
OTHER			Amount:			
			Total Amount:			